

Notice: Incomplete applications will not be considered. Personally identifiable information will be used for grant administration and may be provided to requesters as required by Wisconsin's Open Record law (ss. 19.31-19.39, Wis. Status.).

**Final Report - For equipment with an ECM, a copy of an engine download must be included with the this report. All questions in report must be answered.**

**Business Name or Owner Operator Name:** \_\_\_\_\_ **Report Start Date:** \_\_\_\_\_ **End Date:** \_\_\_\_\_

		Equipment 1	Equipment 2	Equipment 3	Equipment 4
1	Vehicle Identification Number:				
2	Fleet Assigned Unit Number (if applicable):				
3	Make:				
4	Model:				
5	Engine Model Year:				
6	Engine Serial Number:				

**Using the 6+ months from the date the technology was installed, answer the following:**

7	Total Miles Traveled or Usage Rate Hours if non-road/stationary:				
8	Total Miles Traveled or Usage Rate Hours, if non-road/stationary, in WI:				
9	Average Miles Per Gallon or Gallons Per Hour if non-road/stationary:				
10	Average Idling Time (hours/month):				
11	Idle Percentage Time (%):				
12	Fuel Consumed (gallons):				

**Project Type:**

13	Type of technology installed or service provided with grant (please be specific):				
14	Manufacturer of the technology or service provider:				
15	Model of technology (if technology was installed with grant):				

**In Your Opinion (parts of this section should be filled out by the vehicle operator, where applicable)**

		Equipment 1	Equipment 2	Equipment 3	Equipment 4
16	How would you rate the technology? <b>Pick from drop down lists provided in each cell:</b>				
16a	Noise (very loud, quite loud, somewhat loud, not loud):				
16b	Cab comfort, for idle devices (not useful, somewhat useful, quite useful, very useful):				
16c	Ease of use (not useful, somewhat useful, quite useful, very useful):				
16d	Efficiency (not useful, somewhat useful, quite useful, very useful):				
16e	Overall (not useful, somewhat useful, quite useful, very useful):				
17	Would you encourage a fellow driver to purchase the same technology as yours? (y/n):				
18	Would you have purchased the technology without assistance from the WI Clean Diesel Grant Program? (y/n):				
19	What benefits have you realized through the installation of the technology; the pros and cons? (ex:financial savings, good PR, etc.):				

20	If the WI Clean Diesel Grant Program was not available, what do you think is the best way to assist fleets in purchasing clean diesel technologies? <b>Pick from drop down lists provided in each cell:</b>		
20a	Tax incentives (pick one):		
20b	Low-interest loan programs from the government (pick one):		
20c	Low-interest loan programs from financial institutions (pick one):		
20d	Tax rebates (pick one):		
20e	Other:_____ (specify)		
21	What factors motivated you to participate in this grant program:		
22	What improvements would you like to see made to this grant program (please explain):		

I certify that the information within this report is correct and was derived from on-board, electronically recorded data (if ECM-equipped):

Signature	Date
Facility Contact Name	Title

Retain a copy of the completed form for your records and fax (608/267-0560) or mail to:  
Wisconsin Department of Natural Resources, ARRA Clean Diesel Grant Program - AM/7, PO Box 7921, Madison, WI 53707-7921